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CONFIRMATION NO. 3583

SERIAL NUMBER 10/006,465	FILING DATE 12/06/2001 RULE	CLASS 380	GROUP ART UNIT 2133	ATTORNEY DOCKET NO. M-9913-1 US																		
APPLICANTS																						
Bahman Qawami, San Jose, CA; Farshid Sabet-Sharghi, San Jose, CA; Robert C. Chang, Danville, CA; <span style="margin-left: 200px;"><i>SG 4/15/05</i></span>																						
** CONTINUING DATA ***** This appln claims benefit of 60/251,731 12/07/2000 <span style="margin-left: 200px;"><i>SG 4/15/05</i></span>																						
** FOREIGN APPLICATIONS ***** <span style="margin-left: 200px;"><i>SG 4/15/05</i></span>																						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED																						
** 03/04/2002 <table border="1"> <tr> <td>Foreign Priority claimed</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> <td>STATE OR</td> <td>SHEETS</td> <td>TOTAL</td> <td>INDEPENDENT</td> </tr> <tr> <td>35 USC 119 (a-d) conditions met</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after</td> <td>COUNTRY</td> <td>DRAWING</td> <td>CLAIMS</td> <td>CLAIMS</td> </tr> <tr> <td>Verified and Acknowledged</td> <td><i>shewak Goyal/SE</i> Examiner's Signature</td> <td>CA</td> <td>11</td> <td>39</td> <td>4</td> </tr> </table>					Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT	35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS	Verified and Acknowledged	<i>shewak Goyal/SE</i> Examiner's Signature	CA	11	39	4
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ADDRESS 36257 PARSONS HSUE & DE RUNTZ LLP 655 MONTGOMERY STREET SUITE 1800 SAN FRANCISCO , CA 94111																						
TITLE System, method, and device for playing back recorded audio, video or other content from non-volatile memory cards, compact disks or other media																						
FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT <table border="1" style="float: right; margin-top: -20px;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )															
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RECEIVED 1296	No. _____ for following:	<input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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